

ATTORNEY OR PARTY WITHOUT ATTORNEY ( <i>Name, state bar number, and address</i> ):		TELEPHONE AND FAX NOS.:	<b>FOR COURT USE ONLY</b>
ATTORNEY FOR ( <i>Name</i> ):			
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:			
ESTATE OF ( <i>Name</i> ):   <div style="text-align: right;">DECEDENT</div>			
<b>PROOF OF SUBSCRIBING WITNESS</b>			CASE NUMBER:

1. I am one of the attesting witnesses to the instrument of which Attachment 1 is a photographic copy. I have examined Attachment 1 and my signature is on it.
- a. ☐ The name of the decedent was signed in the presence of the attesting witnesses present at the same time by
- (1) ☐ the decedent personally.
- (2) ☐ another person in the decedent's presence and by the decedent's direction.
- b. ☐ The decedent acknowledged in the presence of the attesting witnesses present at the same time that the decedent's name was signed by
- (1) ☐ the decedent personally.
- (2) ☐ another person in the decedent's presence and by the decedent's direction.
- c. ☐ The decedent acknowledged in the presence of the attesting witnesses present at the same time that the instrument signed was decedent's
- (1) ☐ will.
- (2) ☐ codicil.
2. When I signed the instrument, I understood that it was decedent's ☐ will ☐ codicil.
3. I have no knowledge of any facts indicating that the instrument, or any part of it, was procured by duress, menace, fraud, or undue influence.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

.....  
 (TYPE OR PRINT NAME)

.....  
 (ADDRESS)

▶ \_\_\_\_\_  
 (SIGNATURE OF WITNESS)

### ATTORNEY'S CERTIFICATION

(Check local court rules for requirements for certifying copies of wills and codicils)

I am an active member of The State Bar of California. I declare under penalty of perjury under the laws of the State of California that Attachment 1 is a photographic copy of every page of the ☐ will ☐ codicil presented for probate.

Date:

.....  
 (TYPE OR PRINT NAME)

.....  
 (SIGNATURE OF ATTORNEY)